RN Preceptor Schedule and Orientation, 2017

Employee Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DOH:\_\_\_\_\_\_\_\_\_\_\_

**Weeks One through Four:**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Task/knowledge noted** | Shown | Can Do |
|  | Pre-hire test review |  |  |
|  | Competency test review |  |  |
|  | Orientation to office staff |  |  |
|  | Review job description* Receive Organization Chart
 |  |  |
|  | Florida Regulations – given (Web access) |  |  |
|  |  59A-8.000 FS read reviewed |  |  |
|  |  400 FAC read reviewed |  |  |
|  |  CEMP Read reviewed – with 2017 Updates |  |  |
|  | Medicare Regulations – given (Web Access) |  |  |
|  |  ASPEN Regulation set |  |  |
|  | Agency Policy & Procedure Manual |  |  |
|  | Other Manuals Available (TB Control Plan, BBP, HHVBP, MDS manuals, RN Resources) |  |  |
|  |  CFR 484 |  |  |
|  |  Interpretive Guidelines |  |  |
|  | **3 Admissions/Admission Packet - Start** |  |  |
|  |  Home health brochure |  |  |
|  |  Referral Worksheet completion |  |  |
|  |  POC and Advanced Directives forms |  |  |
|  |  Consent for Services |  |  |
|  |  Schedule of Fees and Services |  |  |
|  |  Client Bill of Rights & Responsibilities |  |  |
|  |  Plan of Care/ Physician’s Orders |  |  |
|  |  Nursing Narrative |  |  |
|  |  Special Needs Shelter Registration / CEMP |  |  |
|  |  HH Aide POC & Non-skilled Assignment Sheet |  |  |
|  |  RN Initial Assessment/OASIS C2 and H& P |  |  |
|  |  1 with DON doing 50% of assessment/tasks |  |  |
|  |  1 with RN doing 100% of assessment/tasks |  |  |
|  | Computerized GPS clock in at patient’s home |  |  |
|  | Time Slips with Mileage |  |  |
|  | 3 RN visits reviewed |  |  |
|  | **Take \_\_\_\_\_\_\_\_(software)Training and Self-tutorials**.* Reminder lists
* Scheduling in \_\_\_\_\_\_\_\_\_ (software)
* Deleting and Changing
* Entering a new client
* Entering a new aide
* Employee Block / Vacations
* Print Reports & Schedules
* Run off client list report as requested
* RNs/LPNs assignments
* Staffing Coordinators assigned to Companion/Homemaker clients
 |  |  |
|  | OASIS C2 in\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of EMR) |  |  |
|  |  SOC process: timing, timing, timing |  |  |
|  |  SOC OASIS - Orders Needed per discipline |  |  |
|  |  Medicare Admission Packet – Signature pages |  |  |
|  |  Homebound Status (F2F & office Vs note or facility DC Summary and information) |  |  |
|  | OBQI-PI Explanation - start |  |  |
|  | Review OBQI-PI Manual |  |  |
|  | * Clinical Assessments every 30 days
 |  |  |
|  | * Clinical Assessments every 60 days
 |  |  |
|  | * Med Pours Reviewed with DON
* Med Pours, done and reviewed by DON
 |  |  |
|  | OBQI-PI Audits – start & monthly |  |  |
|  | OBQI-PI Meetings |  |  |
|  | OBQI-PI Goals |  |  |
|  | OBQI-PI Quarterly Statistics |  |  |
|  | Star Ratings - Explanation |  |  |
|  | HHVBP |  |  |
|  | **\_\_\_\_\_\_\_\_\_\_\_(software training) continued** |  |  |
|  | * Staffing Coordinators, Keep \_\_\_\_\_\_\_\_\_ up to date with client records, within 1 hour of notification
* RN’s schedule own appointments
* Client Confidentiality & HIPAA Regulations
 |  |  |
|  | Offices Processes for Staffing Coordinator:* Forward and Unforward Phones
* Distribute Schedules
* New Client Referral-you start the process
* New client referral process to RNs
* Ordering Office Supplies:

Where? = plaid folder Who? = Staffing Coordinator* Review of Aide Notes in \_\_\_\_\_\_\_\_\_(software)
* Lock Cabinets nightly (HIPAA Regulations)
* Do not give out fax number to any solicitors
* Do not give out your e-mail address unless checked with the Director of Nursing
* Our website is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_you may give that out and let them know there is a “contact us” tab to send e-mail.
 |  |  |
|  | Where they are:* Companion/Homemaker Client hard-copy and/or Computerized
* Financial info – refer to Billing Manager
* Medicaid Waiver clients
 |  |  |
|  | Office Protocol:* Communication aids, referral logs, forms, etc.
* Lunch breaks
* Covering Broward office schedule
 |  |  |
|  | Time Lines:* Wed at noon: all known cases through the next weekend should be filled by staffing coordinators (10 days)
* Wed at 4 PM Staff-Coord print schedules
* Friday at 5:00 PM On-call begins
* See On-call list of priorities and who you should notify & when to notify RN & Rhonda
 |  |  |
|  | On-Call for RNs* On-call logs
* Separation of PB and Broward
* Signatures, date/time, response in total.
 |  |  |
|  | On-Call* Staffing Coordinators – On-call pay
* On-call book includes schedules, employee lists with phone numbers:
* When to call RN and/or Rhonda
* Access \_\_\_\_\_\_\_\_\_\_\_(software) while on-call
 |  |  |
| **Month Two** |
|  | Review P & P Manual – with Q & A session |  |  |
|  | Accounts/invoices and payrollHandling overdue accounts (RS and PC) with nurses help |  |  |
|  | Yearly actions |  |  |
|  | Employee EvaluationsEmployee annual re-educationEmployee annual competency check |  |  |
|  | Employee files kept by Human Resources Director* Organization
* Entering Expired Information \_\_\_\_\_\_\_\_\_(software)
* Follow-up needed: From who, who’s responsible, time limit to give employees to get information in
* Copy of Florida regs on needed information.
* Employee of the Month Program
* Print Reminders List for Employees
* Time off request forms.
 |  |  |
|  | Broward Office* ACHC Accredited
* Charts in\_\_\_\_\_\_\_\_\_\_\_(software)
* Broward books.
 |  |  |
|  | ACHC Accreditation* What it means (Director of Nursing)
* Palm Beach to accredited for Medicare
 |  |  |
|  | Marketing Tasks:* Sunshine Calls
* Birthday Cards (Client and employee) Teresa initiates these, we all sign them.
* Every Phone call is marketing.
 |  |  |
|  | Memos to Staff: Who and When |  |  |
|  | New Employee Process:* Hiring Aides
* Test taking (written and demonstrated skills competency)
* Checking references
* Checking backgrounds with entire background check process: When, How; Follow-up.
* Orientation Process – You participate, see orientation check list and employee handbook.
* ID Badges
 |  |  |
|  | Employee file audits* Reminders in \_\_\_\_\_\_\_\_\_(software)
* Keep files Up-to-date
* Audit daily/weekly
* Quarterly Audit Report at QI Meeting
 |  |  |
|  | Forms to use if not computerized:* Client referral form
* Orientation Forms
* Incident Report – Falls
* Grievance Logs
* Unusual Occurrence Form
* Reportable Issues
 |  |  |
| **Month Three** |
|  | Weekly reminder reports by RN |  |  |
|  | Weekly PI Client Meetings – by RN |  |  |
|  | Complete Statistics on: * Incident Report-Falls
* New client referrals
* Hot Line Number
* Client chart \_\_\_\_\_\_\_\_\_\_\_\_\_(software)
* Employee File: Background Check:
* Employee files (find number of in-services to date)
 |  |  |
|  | Client Visits completed/documentation and review* Your client visit list
* Important Dates reports
* Q & A sessions
* What to take
 |  |  |
|  | RN On- Call Questions and Review:* See on-call list when to call Owner
* Keeping On-call logs (RNs and Staffing coordinators.)
* Employee / client incidents
* Routine situations to handle
* Charges for weekend RN visits
 |  |  |

Comments:

RN Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_

DON Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_